

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8
I hereby certify that this correspondence is being deposited with
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Class Mail in an envelope addressed to: Mail Stop Issue Fee,
Commissioner for Patents, PO Box 1450, Alexandria VA 22313-
1450 on May 9, 2005.


Digna M. Colon

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant No. : 09/735,374
Applicant : Lai, D.
Filed : 12/11/2000
Art Unit : 2634
Examiner : Ware, Cicely Q.

Docket No.: : TITAN-55664
Customer No. : 24201

TRANSMITTAL OF ISSUE FEE/NOTICE OF ALLOWABILITY

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

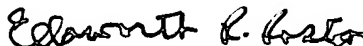
Dear Sir:

In response to the Notice of Allowability mailed on 04/22/2005, please find the attached:

1. A copy of the Notice of Allowability (dated 04/22/2005);
2. Part B – Fee(s) Transmittal; and
3. Our check in the amount of \$1700.00 to cover the required Issue Fee and Publication Fee.

Respectfully submitted,

FULWIDER PATTON LEE & UTECHT, LLP



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Notice of Allowability

Application No.	Applicant(s)	
09/735,374	LAI ET AL.	
Examiner	Art Unit	
Cicely Ware	2634	

The MAILING DATE of this communication appears on the cover sheet with the correspondence address-- All claims being allowable, PROSECUTION ON THE MERITS IS (OR REMAINS) CLOSED in this application. If not included herewith (or previously mailed), a Notice of Allowance (PTOL-85) or other appropriate communication will be mailed in due course. **THIS NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RIGHTS.** This application is subject to withdrawal from issue at the initiative of the Office or upon petition by the applicant. See 37 CFR 1.313 and MPEP 1308.

- ☒ This communication is responsive to amendment filed on 11/21/04.
- ☒ The allowed claim(s) is/are 1-35.
- ☒ The drawings filed on 21 November 2004 are accepted by the Examiner.
- ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
 - ☐ All ☐ Some* ☐ None of the:
 - ☐ Certified copies of the priority documents have been received.
 - ☐ Certified copies of the priority documents have been received in Application No. _____.
 - ☐ Copies of the certified copies of the priority documents have been received in this national stage application from the International Bureau (PCT Rule 17.2(a)).

* Certified copies not received: _____.

Applicant has THREE MONTHS FROM THE "MAILING DATE" of this communication to file a reply complying with the requirements noted below. Failure to timely comply will result in ABANDONMENT of this application.
THIS THREE-MONTH PERIOD IS NOT EXTENDABLE.

- ☐ A SUBSTITUTE OATH OR DECLARATION must be submitted. Note the attached EXAMINER'S AMENDMENT or NOTICE OF INFORMAL PATENT APPLICATION (PTO-152) which gives reason(s) why the oath or declaration is deficient.
 - ☐ CORRECTED DRAWINGS (as "replacement sheets") must be submitted.
 - ☐ including changes required by the Notice of Draftsperson's Patent Drawing Review (PTO-948) attached
 - ☐ hereto or 2) ☐ to Paper No./Mail Date _____.
 - ☐ including changes required by the attached Examiner's Amendment / Comment or in the Office action of Paper No./Mail Date _____.
- Identifying indicia such as the application number (see 37 CFR 1.84(c)) should be written on the drawings in the front (not the back) of each sheet. Replacement sheet(s) should be labeled as such in the header according to 37 CFR 1.121(d).
- ☐ DEPOSIT OF and/or INFORMATION about the deposit of BIOLOGICAL MATERIAL must be submitted. Note the attached Examiner's comment regarding REQUIREMENT FOR THE DEPOSIT OF BIOLOGICAL MATERIAL.

Attachment(s)

- | | |
|---|--|
| 1. <input type="checkbox"/> Notice of References Cited (PTO-892) | 5. <input type="checkbox"/> Notice of Informal Patent Application (PTO-152) |
| 2. <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | 6. <input checked="" type="checkbox"/> Interview Summary (PTO-413),
Paper No./Mail Date _____ |
| 3. <input type="checkbox"/> Information Disclosure Statements (PTO-1449 or PTO/SB/08),
Paper No./Mail Date _____ | 7. <input checked="" type="checkbox"/> Examiner's Amendment/Comment |
| 4. <input type="checkbox"/> Examiner's Comment Regarding Requirement for Deposit
of Biological Material | 8. <input checked="" type="checkbox"/> Examiner's Statement of Reasons for Allowance |
| | 9. <input type="checkbox"/> Other _____ |